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Judiciary Committee Testimony.

Thank you Chairman Coleman and Chairman Fox, Vice Chairs, Ranking Members and Members of the Judiciary Committee. My name is Erik Williams. I am a resident of Coventry, Connecticut and the volunteer Executive Director of the Connecticut Chapter of NORML, the National Organization for the Reform of Marijuana Laws. NORML is the nation's oldest and largest marijuana reform organization.

I am here today to testify in favor of SB 953, SB 1014, SB 1015 and HB 6566, supporting the decriminalization of less than one ounce of marijuana and in favor of patient access to their prescribed medicine. We support medical marijuana as do the vast majority of Connecticut residents.

We support equally the language in the decriminalization bills, SB 1014 and SB 953. On the palliative or compassionate use of marijuana, we favor the language of HB 6566, for reasons which I shall explain shortly.

First, I would like to briefly address the decriminalization of marijuana. I would like to applaud our Governor and so many legislators who have taken a stand against this arcane and counter-productive criminalization of so many productive members of our community. We applaud their reprioritization of precious public safety and law enforcement dollars towards fighting violent crimes and crimes against property. The cost of prosecuting this non-violent crime is wasted. This will also save millions of dollars for thousands of individual taxpayers and result in a better quality of life.

The taxpayer money saved from arresting, prosecuting and putting people within the correctional system is a no-brainer. The positive monetary affect and improved quality of life of decriminalization on average individual citizens and families is clear as well. Thousands of adults attending higher education institutions have lost their federal or state financial aid, jeopardizing their college careers. The State of Connecticut and this legislature's support of higher education for its positive affect on long-term quality of life and economic development is clear. Thus, the ruining of a person's life for a simple possession of a single joint sends the wrong message. The affect of having to answer the arrest record questions on employment applications has also stunted the lives and earning potential of too many of your friends, neighbors and constituents.

People may speak about the message decriminalization will send to our children. Though I balk at the idea that our children are turning to the legislature for messages about how to comport their lives and be good, moral, productive citizens, I submit to you that any messages sent are positive ones. The first one is that there is no place for drug

use of any kind among children, whether it be alcohol, cigarettes, prescription drugs or marijuana. Second, that responsible adults make responsible decisions. Third, that a person's life should not be ruined by possessing a plant that grows in the ground and which has never killed a single individual - ever - not one. And fourth, that Connecticut's government is truly representative of the people, not subject to fear campaigns and mistruths and willing and able to correct the wrong of bad public policy.

Lastly on SB 953 and 1014, Contrary to the concerns of some, making marijuana possession offenses a civil matter would not negatively impact marijuana use patterns or attitudes. Passage of similar legislation in other states has not led to increased marijuana use or altered adolescents' perceptions regarding the potential harms of drug use. In fact, a US Health and Human Services study, the only US government study ever commissioned to assess whether the enforcement of strict legal penalties positively impacts marijuana use found, "Overall, the preponderance of the evidence which we have gathered and examined points to the conclusion that decriminalization has had virtually no effect either on the marijuana use or on related attitudes and beliefs about marijuana use among American young people."

The canaries have been safely flying in and out of the mine shaft for many years on this issue.

ON MEDICAL MARIJUANA

We at Connecticut NORML support allowing doctors and patients to make medical decisions and legal access to medical marijuana.

I will not testify today to the medicinal benefits of marijuana as you will hear today many stories directly from patients and their caregivers. You will hear of horrible suffering from a number of illnesses, inflictions and ailments and the effective ways in which medical marijuana has helped persons. I know because I have been told dozens of these stories from all walks of Connecticut life and I am not embarrassed to say that some of these heartbreaking stories moved me to tears. Too many of your fellow citizens, your constituents, are suffering enough without having to suffer the indignity of being called criminals in their times of crisis.

I do, however, want to address a few language issues NORML has with SB 1015 and point out that some of these issues are remedied in HB 6566

One ounce limit:

The one ounce limit on useable marijuana would be among the lowest threshold of any medical marijuana state in the nation (Oregon law, for instance, allows for 24 ounces), and would arguably not suffice for some patients needs. Better to go with a higher limit at first, and let lawmakers lower

the threshold if they so choose to. HB 6566 addresses this through the formation of a Commission made up of relevant doctors through the Department of Consumer Protection.

Access to doctor-prescribed medicines:

We do not see any means for a person suffering from debilitating diseases or elderly persons to grow their medicine as a practical matter. Asking such a person, who may or may not have any ability to grow a geranium, let alone a medical-grade marijuana plant, is not practical. We support some form of state regulated dispensaries. This could be done through a variety of means, whether they be stand-alone, through pharmacies, for profit, not-for-profit, cooperatives or any other way. Therefore, we support providing language for state-authorized dispensaries, and several states have since or are now considering such language, but this language should not restrict patients' ability to home grow. Prior to the Holder DOJ memo, virtually no states even considered such a state-licensing option. To date, only New Mexico and Colorado license dispensaries, though both states also allow for home cultivation. Maine and Rhode Island are in the process of licensing dispensaries, and both allow home grow.

We note that this has the potential to be a major revenue generator for the state through licensing, taxes and fees, but NORML does not submit that as its reason for support this common sense bill.

Non-smoked options:

We can all agree that smoking absolutely anything has negative health effects, though many doctors and their patients have decided that any positive effects clearly outweigh the negatives from smoking. But that is not the only method for patients to get their medicine. Many patients now utilize medical cannabis in various non-smoked forms, such as liquid extracts/tinctures, ointments, edibles, concentrates, etc. Language ought to be included in the legislation defining such natural plant cannabis-derived products (sometimes referred to as 'marijuana-infused' products), when possessed by authorized patients for medical purposes, as legal under the law in the same manner as dried marijuana and/or plants are legal.

Legislature as doctor:

It is our position that the sate of Connecticut should allow doctors to be doctors and treat their patients in the way that they mutually deem to be in the patient's best interests. We understand that there has been abuse of marijuana prescriptive authority, particularly in California. We also note that there has been abuse of prescriptive authority of currently legal prescription drugs in Connecticut and every other state in the country. The legislature stepping between the doctor and their patient is not the solution. We do not know of other places in Connecticut law where we codify the specific diseases, ailments or sicknesses that are allowed to be treated with any specific therapy or prescription drug. Again, this is addressed by the Consumer Protection commission as provided for in 6566.

Members of the Judiciary Committee, NORML supports both these common sense ideas of decriminalization of small amounts of marijuana and allowing for the compassionate use of medical marijuana. The general public, your constituents, overwhelmingly supports both these common sense ideas, and we urge you to support these common sense bills as well.

Thank you and I would be more than happy to answer any questions the Committee should have.